

**Bureau of Community Supports and Services (BCSS)
PROVIDER ENROLLMENT ORIENTATION WORKSHOP
AGENDA**

9:00 a.m. - 9:15 a.m.	Welcome/Introductions/Housekeeping Roslyn Matthews – BCSS Provider Relations Section
9:15 a.m. - 10:15 a.m.	General Overview of Waiver Services <ul style="list-style-type: none">• Review of Handout Materials Delphine Jackson
10:15 a.m. -10:30 a.m.	Break
10:30 a.m. -12:00 p.m.	Medicaid's Provider Standards of Participation Key Points: <ul style="list-style-type: none">• Provider Requirements/Responsibilities• Provider Enrollment Forms Completion/Submissions Process• General Provisions• Home & Community-Based Standards of Participation• Failure to Meet Minimum Standards• Solicitation Delphine Jackson
12:00 p.m. - 1:00 p.m.	Lunch
1:00 p.m. - 3:00 p.m.	Linking Quality to Life - Quality Assurance/Quality Improvement for Providers of Home and Community-Based Waiver Services Barbara Chustz, BCSS Quality Assurance Coordinator
3:00 p.m. – 3:15 p.m.	Break
3:15 p.m. - 4:15 p.m.	UNISYS Provider Enrollment Representative Sharon Harless
4:15 p.m. - 4:30 p.m.	Question and Answer Period
4:30 p.m.	Adjournment

FEEDBACK FORM

In an effort to continuously improve our training and provide you with meaningful learning experiences, we would appreciate your comments and suggestions. Please complete this feedback form and place it in the box marked **“FEEDBACK FORMS”**. Your opinions/suggestions are very important to us.

Title of Workshop/Training: Provider Enrollment Orientation Workshop

Workshop/Training Date:

Location of Workshop/Training:

Workshop/Training Content	Poor		Excellent		
Materials presented were educational & useful	1	2	3	4	5
Overall materials were helpful & Informative	1	2	3	4	5
COMMENTS:					
Presenter(s)	Poor		Excellent		
Topics were well organized & presented	1	2	3	4	5
Learning Activities were well executed & effective	1	2	3	4	5
Effective responses to questions were provided	1	2	3	4	5
COMMENTS:					

What topic/activity was most beneficial to you?

What topic/activity was least beneficial to you?

Was there an area you felt needed more attention?

Do you have any suggestions comments to enhance this training?

Other Comments:



Bureau of Community Supports and Services

Louisiana Department of Health and Hospitals
Bureau of Community Supports and Services
Outreach, Education and Training Section

12/20/04

1

PRESENTS

An Overview Of

Home and Community-Based Waiver Services

12/20/04

2

A Little About BCSS



12/20/04

3

- The Louisiana Department of Health and Hospitals (DHH) formed the Bureau of Community Supports and Services (BCSS) within the Office of the Secretary of DHH in August of 2000.

12/20/04

4

- The BCSS is charged with the coordination, oversight and program eligibility determination of home and community-based waiver services for eligible Louisiana citizens who would otherwise require care in an institutional setting.

12/20/04

5

- Home and community-based services waivers provide supports and services as a supplement to natural supports while supporting dignity, quality of life, and security in the everyday lives of people.

12/20/04

6

BCSS MISSION

- The mission of the Bureau of Community Supports and Services is to ensure that resources dedicated by the Louisiana Legislature for community-based waiver services are effectively and efficiently delivered and received by eligible recipients.

12/20/04

7

BCSS VISION

- The vision of BCSS is to provide a framework for home and community-based services for Louisiana citizens whereby individuals who choose this option can be assured a safe and healthy environment, quality services, and are empowered within state and federal rules and regulations with the opportunity to direct their lives based on their desired personal outcomes.

12/20/04

8

SIMPLY STATED...

The BCSS is focused on "HOME":

- *H = Home & Community
- *O = Options and Choice
- *M = Meaningful, Quality Services
- *E = Empowering Recipients to Direct Their Personal Outcomes

12/20/04

9



BCSS ORGANIZATIONAL STRUCTURE

- The BCSS is composed of nine (9) regional offices located throughout the state which are administratively supported by a State Office component housed in Baton Rouge.

12/20/04

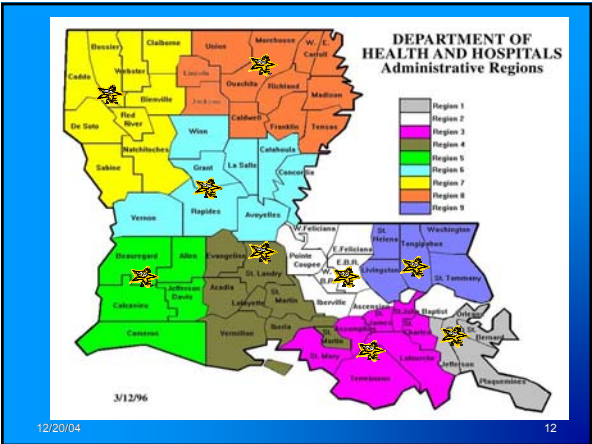
10

BCSS REGIONAL OFFICES

- REGION 1: NEW ORLEANS
- REGION 2: BATON ROUGE
- REGION 3: THIBODAUX
- REGION 4: LAFAYETTE
- REGION 5: LAKE CHARLES
- REGION 6 : ALEXANDRIA
- REGION 7: SHREVEPORT
- REGION 8: MONROE
- REGION 9: MANDEVILLE

12/20/04

11



12/20/04

12

So, What is a Waiver?



12/20/04

13

Home and Community Based Service (HCBS) Waivers



- In 1981, Congress authorized the waiver of certain federal requirements to enable a state to provide home and community based services (other than room and board) to individuals who would otherwise require hospital, nursing facility or intermediate care facility (ICF/MR) care.

12/20/04

14

- The HCBS waiver program recognizes that many individuals at risk of being placed in these facilities can be cared for in their homes and communities, preserving their independence and ties to family and friends at a cost no higher than that of institutional care.

12/20/04

15

1915(C) HCBS Waivers

- 1915(c) waivers are named after the section of the Social Security Act that authorized them.



12/20/04

16

- Under 1915(c) Waiver authority, states can provide services not usually covered by the Medicaid program, as long as these services are required to keep a person from being institutionalized.



12/20/04

17

- Under HCBS Waiver programs, the comparability, state wideeness and community income resource rules for the medically needy may be waived to enable states to target distinct groups of recipients.

12/20/04

18

- Federal regulations permit HCBS waiver programs to serve the elderly, persons with physical disabilities, developmental disabilities, mental retardation or mental illness. States may also target 1915(c) waiver programs by specific illness or condition, such as technology-dependent children or individuals with AIDS.

12/20/04

19

- States can make home and community-based services available to individuals who would otherwise qualify for Medicaid only if they were in an institutional setting.

12/20/04

20

- To receive approval to implement HCBS waiver programs, State Medicaid agencies must assure the Centers for Medicare and Medicaid Services (CMS) formally known as the Health Care Financing Administration (HCFA), that on an average per capita basis, the cost of providing home and community-based services will not exceed the cost of care for the identical population in an institution.

12/20/04

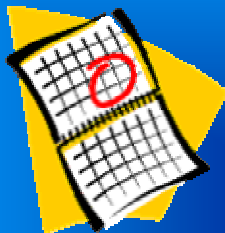
21

- The Medicaid agency must also document that there are safeguards in place to protect the health and welfare of beneficiaries.

12/20/04

22

- HCBS waivers are Initially approve by CMS for three (3) years and renewed every five (5) years thereafter.



12/20/04

23

What Waiver Programs Are Currently Available In Louisiana?



12/20/04

24

- Types of home and community based services waiver currently available in Louisiana include:

New Opportunities Waiver (NOW)

Elderly and Disabled Adults (EDA)

Adult Day Health Care (ADCH)

Children's Choice

12/20/04

25

- Each waiver has specific service packages and eligibility requirements.



12/20/04

26

NEW OPPORTUNITIES WAIVER (NOW)



12/20/04

27

NOW Provides services such as:

- Individualized and Family Support (IFS) Service- Day-Night
- Shared Supports for some services
- Centered –Based Respite
- Community Integration Development,
- Environmental Accessibility Modifications
- Substitute Family Care
- Specialized Medical Equipment and Supplies
- Residential Habilitation-Supervised Independent Living
- Day Habilitation

12/20/04

28

NOW Services (cont'd):

- Supported Employment and Transportation for Supported Employment
- Facility-Based Employment
- Professional Services
- Professional Consultation
- Personal Emergency Response System
- Skilled Nursing Service
- Substitute Family Care
- Transitional Expenses
- Transitional Professional Support Service

12/20/04

29

Who is eligible?

- Individuals who require the level of care of an institution for people with developmental disabilities but choose to live in the community. The developmental disability must have manifested prior to the age of 22.

12/20/04

30

Prerequisites:

- Individual's disability must meet Louisiana's definition for mental retardation or developmental disability.
- Individual must meet Medicaid financial and medical requirements.

12/20/04

31

Elderly and Disabled Adult Waiver (EDA)



12/20/04

32

EDA Waiver Provides services such as:

- Case Management Services
- Intensive Case Management Services
- Household Supports
- Personal Supervision (Day/Night)
- Environmental Modifications
- Personal Emergency Response System (PERS)
- Transitional Service

Note: Long-Term-Personal Care Services (i.e., bathing, dressing, grooming, etc.) are provided to eligible participants via the Medicaid LT-PCS program.

12/20/04

33

Who is eligible?

- Individuals must meet the level of criteria for nursing facility care, be 65 years of age or older, OR be determined disabled according to criteria set forth in this waiver, AND meet Medicaid financial requirements.

12/20/04

34

Prerequisites:

- Individual must meet Medicaid financial requirements.
- Individual must meet Nursing Facility level of care with medical and social information submitted to support the determination.

12/20/04

35

Adult Day Health Care Waiver (ADHC)



12/20/04

36

Services Offered:

- Adult Day Health Services are provided in a licensed ADHC facility, and are designed to meet the needs of adult persons who are aged and/or functionally impaired.
- Individuals attend the ADHC for part of the day, and return home at the end of each day.

12/20/04

37

ADHC Services Offered Include:

- Health Services – nursing care and oversight
- Direct Care Staff – personal Care Attendants
- Social Services – Social Worker Consultants
- Nutrition – Dietary Services
- Transportation to and from the ADHC as needed, and/or to specific medical appointments related to the individual's treatment plan.

12/20/04

38

Who is eligible?

- Individuals age 65 or older, or individuals with disabilities 22 years or older who meet the definition of disability under SSI and meet the level of care criteria for nursing facilities.

12/20/04

39

Prerequisites:

- Must meet age requirements.
- Must meet Medicaid financial requirements.

12/20/04

40

Children's Choice Waiver



12/20/04

41

Children's Choices Services:

- Family Support
- Family Training
- Center-based Respite
- Environmental Accessibility Adaptations
- Diapers
- Case Management

12/20/04

42

- **IMPORTANT NOTE:**

The Children's Choice Waiver is a capped waiver. During fiscal year 2001/2002, the DHH requested and received approval from the Louisiana Legislature to increase the annual Children's Choice Waiver cap of \$7,500 per recipient to \$15,000.

12/20/04

43

Who is eligible?

- Children ages birth through 18 years with developmental disabilities who currently live at home or will leave an institution to return home and whose names are on the BCSS MR/DD Request for Services Registry.

12/20/04

44

Prerequisites:

- Child must be on the BCSS MR/DD Request for Services Registry.
- Must be less than 19 years of age
- Must meet MR/DD criteria.
- Must require the level of care provided in an ICF/MR facility.
- Must meet all Medicaid financial requirements.

12/20/04

45

Prerequisites:

- Child must be on the BCSS MR/DD Request for Services Registry.
- Must be less than 19 years of age
- Must meet MR/DD criteria.
- Must require the level of care provided in an ICF/MR facility.
- Must meet all Medicaid financial requirements.

12/20/04

46

How are waiver services accessed?

- To request EDA, and/or ADHC waiver services, individuals, and/or their authorized representative must call the *Louisiana Options In Long Term Care Toll Free Help Line at: 1-877-456-1146 (TDD Line: 1-877-465-1172)
- * Effective Monday, Nov. 22, 2004 the Medicaid Parish offices will assume responsibility for LTC financial application functions. Individuals are to contact the Medicaid Parish office in their area to inquire/request EDA/ADHC waiver services starting 11/22/04.

12/20/04

47

- To request NOW and Children's Choice waiver services, individuals, and/or their authorized representative must contact the Office for Citizens with Developmental Disabilities (OCDD) office in their area.

12/20/04

48

What happens after an individual calls to request waiver services?

- An individual's name is placed on a Request for Services Registry (RFSR), and upon availability of funding, a HCBS waiver opportunity for services (referred to as a "slot") is offered to the individual whose name is next on the RFSR.

12/20/04

49

What is a RFSR?

- A Request for Services Registry (RFSR) is an official list of individuals who have requested HCBS waiver services. Individuals are listed by the date and time of their request for services and may request to be placed on more than one waiver list, but may only receive services from one waiver at a time.

12/20/04

50

Number of Existing "Slots" (allocated/budgeted)

- HCBS Waiver Opportunities have increased by 187 percent since 1996.

From 3,107 to current total of 8,605 opportunities

NOW: 4,576
 EDA: 2,179
 PCA: *387 (*All PCA Slot to be Transferred to EDA by 12/31/04)
 ADHC: 663
 CC: 800

(Totals as of end of FY 03/04)

12/20/04

51

Number of participants who received waiver services in FY 03/04:

• NOW: 4,433
 • CC: 766
 • EDA: 2,054
 • PCA: 335
 • ADHC: 562

12/20/04

52

RFSR Date Of Last Offer (As of 03/14/05)

NOW	02/22/95
CC	08/03/99
EDA	03/26/03
ADHC	11/10/05

12/20/04

53

August 20, 2004 Emergency Rule Programmatic Allocation of Waiver Opportunities

- Minimum of 90 opportunities for allocation to foster children in the custody of Office of Community Services (OCS);
- Minimum of 160 opportunities for people living at Pinecrest and Hammond Developmental Centers, or their alternates, who have chosen to be deinstitutionalized;

12/20/04

54

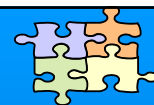
August 20, 2004 Emergency Rule Programmatic Allocation of Waiver Opportunities (Cont'd)

- 10 opportunities for Developmental Neuropsychiatry Program (DNP)
- 66 opportunities for emergency waiver services

12/20/04

55

Work in Progress



- Implementing objectives of CMS Grants
- New Points of HCBS Waiver Access:
 - Single Points of Entry- 1st SPOE for Elderly and Disabled Adults on July 1, 2004, ADRC Grant, and OCDD.
- More Public Education and Information about HCBS.

12/20/04

56

Work in Progress



- Implementing Accountability Requirements made necessary by CMS' HCB Waiver QA requirements, GAO Reports and Legislative Audits.
- Coordination of HCB waiver services with Ticket to Work.

12/20/04

57

Work in Progress

- Increasing numbers of new providers
 - Over 1000 HCBS waiver providers
 - Enrollment seminars continue with increasing interest by potential providers.
 - Diversification efforts with existing providers.

12/20/04

58

Future Challenges



- More people requesting HCBS Waiver opportunities than funding available.
- Challenges of the shift to a community-based system.
- HCB Infrastructure needs to continue to mature and develop to support the future growth of this option.
- QA systems that support the safety, well-being of participants and responds to participant requests for more control over the services they receive.

12/20/04

59

Future Challenges

- Future changes/initiatives in Louisiana's HCB Services that will serve as catalysts for rebalancing and embracing a system of LTC, and that will serve Louisiana citizens well into the future are:
 - Health Care Reform Panel
 - National Governor's Association Policy Academy Team
 - Consumer Task Force
 - CMS Grants

12/20/04

60

Provider Enrollment Orientation for Service Providers Regarding Home and Community-Based Waivers

Important Points Regarding Provision of Home and Community-Based Waiver Services:

1. Providers of home and community-based waiver services should always focus on **meeting the individualized needs and preferences of waiver participants** in their care. The amount, type and delivery of services provided should never be planned for, or based on the needs/ convenience of the provider.
2. The **individual** has the freedom to choose the Support Coordination Agency (Case Management) and the Direct Service Provider from whom they want to receive services. The Support Coordination Agency offers the Freedom Of Choice (FOC) via an approved BCSS FOC list to the individual **The Direct Service Provider is not to solicit business.**
3. The Support Coordinator assists the individual in the coordination of all services needed by the individual. The Support Coordination Agency is responsible for developing an initial and subsequent annual, comprehensive plan of care (CPOC). The CPOC must reflect the individual's preferences and choice of services. The Direct Service Provider (DSP) should be in attendance during initial and annual CPOC planning meetings to facilitate the planning process, and to better understand and meet the needs of the individual.
4. The Bureau of Community Supports and Services (BCSS) must review and approve all CPOCs before authorization of services is given.
5. The Direct Service Provider develops an individualized service plan in accordance with the approved CPOC, and ensures that all services are provided in accordance with that plan.
6. All services are approved in the CPOC, and prior authorized (PA) before the Direct Service Provider can receive reimbursement for providing those services. If services are provided without being listed in the approved CPOC, and/or prior to receiving prior approval (PA) - BCSS **CANNOT reimburse the provider for services rendered.**
7. The service provider must meet all assurances of licensing, Medicaid enrollment, HIPAA, and BCSS Provider Training and Standards.

Provider Enrollment Orientation for Service Providers Regarding Home and Community-Based Waivers

8. The Support Coordination Agency and the Direct Service Provider is expected to keep accurate and timely documentation regarding service provision. This includes documentation in the form of progress notes, service logs, time sheets verifying services, and the like. **Simple checklists will not be considered as adequate documentation.**
9. The Direct Service Provider must keep the BCSS informed, in accordance with provider standards, of any changes in address, telephone numbers, change of ownership, and/or any changes that impact their ability to comply with the minimum Standards of Participation as an enrolled provider of waiver services.
10. The Direct Service Provider is to keep the Support Coordinator informed regarding any changes that affect delivery of services as specified in the CPOC.
11. The Support Coordinator is responsible for the planning and coordination of services for the participant. The service provider is required to communicate and cooperate with the planning and implementation process.
12. The Direct Service Provider is required to report critical incidents to BCSS within 2 hours of first knowledge of the incident. Immediate jeopardy situations shall be handled immediately and as outlined in the Provider Standards for Participation.
13. The Support Coordinator Agency and Direct Service Provider are responsible to assist in the provision of information for the individual who elects to transfer by FOC to another provider.
14. When a waiver participant transfers from one Direct Service Provider agency to another - the transferring Direct Service Provider is to complete a service balance report to reflect the dollar amount of services used to date, and the remaining service balance for current CPOC year. This log must be submitted to the Support Coordinator along with the revision to the CPOC reflecting the change in Direct Care Service Provider.

BCSS REGIONAL OFFICES			
Region	Regional Manager	Address	Phone/Fax Numbers
Region 1: New Orleans	Beverly Danton	1010 Common Street, Suite 505 New Orleans, LA 70113	Phone: (504) 568-8564 FAX: (504) 599-0293
Region 2: Baton Rouge	Thomas Bickham	6554 Florida Blvd., Suite 238 Baton Rouge, LA 70806	Phone: (225) 925-6286 FAX: (225) 925-6298
Region 3: Thibodaux	Todd Guillot	1148 Tiger Drive Thibodaux, LA 70301	Phone: (985) 449-4725 FAX: (985) 449-4706
Region 4: Lafayette	Anne Oliver	128 Demanade Drive, Suite 104 Lafayette, LA 70503	Phone: (337) 262-1612 FAX: (337) 262-1300
Region 5: Lake Charles	Mike Duran	2300 Broad Street Lake Charles, LA 70601	Phone: (337) 491-2060 FAX: (337) 491-2005
Region 6: Alexandria	Ramona Ryland	1517-B Washington Street Alexandria, LA 71301	Phone: (318) 484-2310 FAX: (318) 487-5968
Region 7 Shreveport	Tim Cain	3018 Old Minden Road, Suite 1190 Bossier City, LA 71112	Phone: (318) 741-2700 FAX: (318) 741-2722
Region 8: Monroe	Ramona Ryland Acting – Regional Manager	1401 Hudson Lane, Suite 236 Monroe, LA 71201	Phone: (318) 362-4612 FAX: (318) 362-4611
Region 9: Mandeville	Mary Burns Paul Beyer – Acting Regional Manager	21454 Koop Drive, Suite 2B Mandeville, LA 70471	Phone: (985) 871-1352 FAX: (985) 871-8346